

Global Health Research Group on Prevention & Management of Non-Communicable Diseases and HIV infection in Africa.

RESEARCH STUDIES

Management of Chronic Conditions in Africa (MOCCA) study – Now happening in all 10 facilities. Following the Steering Committee decision, ethics amendments have been submitted to end new patient enrolment.

Follow-up of MOCCA clinics will continue in INTE-AFRICA and may represent an important cohort.

A lessons learned log has been circulated to capture key lessons from MOCCA, which will be published in due course.

META Trial Phase 2 – Tanzania FDA have approved import of metformin. We are waiting for a GMP waiver for dispensing the metformin and placebo. CRFs and SOPs have been drafted and will be piloted shortly. Shabbar will visit Tanzania in the next few weeks to run through SOPs and CRFs.

INTE-AFRICA – the project kick-off meeting was held on 27-28 March in Liverpool with representation from Ministry of Health in Uganda and Tanzania and from all work package leads. Key issues discussed:

Governance:

It was agreed that a Dissemination Committee will be formed to oversee the process of publications. Comprising work package leads and representation from the Ministries of Health, this group will coordinate the production of papers in a fair and equitable manner, following international best practise.

Terms of Reference and membership of the overall Steering Committee and all sub-committees will be shared shortly for partner review.

Deliverables and Milestones:

A project gantt chart has been shared with partners alongside quarterly narrative and financial reporting templates - please return these to Hazel by 10 May!

Deliverables due by end of June are

- Data Management Plan (Mfinanga and Shabbar)
- Expert Panel established (Walter)

Drugs Supply:

We await recommendations from the smaller working group on this following detailed discussion at the kick-off meeting. It is critical that our results are applicable when published in 3-4 years' time, therefore need to consider what might be the major policy changes around access to drugs in that time. As it is highly unlikely that EU funds will cover the cost of drugs, the clinical services must come up with solutions.

PAPERS

Papers in late stage of development:

- ✚ Systematic review of the safety of metformin in HIV patients also taking antiretroviral therapy.
- ✚ Systematic review on rates of retention-in-care for type 2 diabetes management in sub-Saharan Africa.
- ✚ Survival rate for individuals with type one diabetes after institution of an appropriate program in health facilities in Tanzania.
- ✚ Systematic review on the prevalence of microvascular and macrovascular complications of diabetes in newly diagnosed diabetes patients – first reviewer (Tsi) has finished the screening process and we're currently looking for a second reviewer to repeat the process.

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Suggested papers from MOCCA:

- ✚ What is the level of retention for persons treated using the integrated approach (main paper)?
- ✚ Diabetes diagnosis and determinants of loss from care in an integrated programme
- ✚ Hypertension diagnosis and determinants of loss from care in an integrated programme.
- ✚ Clinical Findings
- ✚ Implementation – how the study was implemented and ethical issues
- ✚ What are the costs patients incur to access care? How do these vary for HIV, diabetes and hypertension?
- ✚ What are the costs of different components of care? What is the annual cost of drugs?
- ✚ Management in practice – how are people diagnosed, drugs availability and adherence
- ✚ Integration of HIV and NCD services: Acceptability of clients and providers perspective in Tanzania and Uganda.
- ✚ What is the impact of integration on HIV outcomes?

Suggested papers from META Trial Phase 2:

- ✚ Main Paper from metformin trial on effects on glycaemia
- ✚ Effects as according to method of baseline diagnosis of diabetes
- ✚ Clinical features of pre-diabetes versus diabetes patients
- ✚ Costs
- ✚ The incidence of diabetes and pre-diabetes
- ✚ What happens to the persons diagnosed with diabetes in terms of getting into care?
- ✚ When should people in Africa be screened for diabetes? What age, sex, BMI profile?
- ✚ Multi morbidity: In persons with HIV-infection compare i) diabetics, ii) diabetics plus TB, diabetics and hypertensives in terms of progression of glycaemia. Look also at effects as according to HIV regimens.
- ✚ Trial Protocol paper.

Suggested papers from INTE-AFRICA

- ✚ Study Protocol. This paper is the priority and currently being drafted by Anu, Josephine and Sokoine.

COMMUNICATIONS

Logo: Working with ISGlobal we are delighted to announce the winning logo for INTE-AFRICA. From a choice of 5 options, partners have voted for the following logo, which represents our partnership, highlights Uganda and Tanzania and the research areas we are working in. Thank you to everyone who took the time to vote. This logo will appear on all INTE-AFRICA material accompanied by the standard EU acknowledgement.



Website: ISGlobal are working on a website for INTE-AFRICA and will share design ideas shortly.

Visit to Uganda: Along with Shabbar and Hazel, Camila and Jeff from ISGlobal will visit Uganda week of 10 June to talk to Ministry of Health, partners and health care workers about communication tools needed to promote the work of INTE-AFRICA. They will also take some professional photographs.

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Posters: As part of the project we will need to develop posters for two purposes – one for health care facilities to encourage enrolment in the study and one more general poster to promote awareness of diabetes and hypertension if the MoH wishes. We will prepare some draft posters to bring to Uganda.

Film: To promote the work of the NIHR Global Health Research Group we are working with a local artist to make a 2-minute animated film outlining the global challenge, the research partnership and what we plan to do. We are currently drafting a script for this animation and will share with partners soon.

Key communication messages/Style Guide: To be consistent in our messaging we are developing a style guide for communications which includes key messages but also standardisation across how we describe things, such as INTE-AFRICA, MOCCA and NIHR Group. This will be shared widely.

International Days: The following key dates are opportunities for us to celebrate our work and raise awareness of our research – perhaps an opportunity to write a blog, a viewpoint or release a new paper!

World Hypertension Day - 17 May
World Diabetes Day – 14 November
World AIDS Day – 1 December

CAPACITY DEVELOPMENT

Josephine attended a 2-week course in Liverpool School of Tropical Medicine on Statistics for Clinical and Epidemiological research. The course has equipped her with skills to conduct analysis and use data for drafting manuscripts, review journal articles and provide mentorship to the study team members in Uganda

Anu and Sokoine are developing a short proposal extract data from records of HIV-infected patients with diabetes from one or two health facilities. The hope is that the learning will inform a larger proposal involving data from records.

MEETINGS

Stakeholders meeting in Uganda, 21 March 2019.



Policy makers, health care providers, researchers, and civil society representatives held a meeting to discuss the progress and lessons learned from the MOCCA project.

Dr Joshua Musinguzi, the Assistant Commissioner and Head of the AIDS Control Programme (ACP) at the Ministry of Health applauded the research team and emphasized the importance of using existing systems and infrastructure to improve healthcare. “Using the existing HIV platforms to manage NCDs will improve the treatment outcomes as HIV is well resourced and has strong established care systems.” He ended his remarks with a pledge to support the integration of chronic health care (HIV/NCDs) in Uganda’s healthcare system and emphasized the urgent need for more evidence to support policy change

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WHO Expert consultation on integration of NCDs and Mental Health Conditions into HIV treatment programmes in Geneva, 9th-10th April 2019.



Shabbar attended a meeting hosted by the HIV department within WHO, attended by groups from UK, US and across Africa, working in different NCDs and mental health.

The discussions were around adding screening and management for NCDs and mental health onto HIV programmes, i.e. doing this just for the HIV-populations. Some meeting participants were uncomfortable about the provision of services only for the HIV population; WHO were taking the view that progress here in this restricted group will lead to greater access for all.

A lot of time was spent on which services, with most agreeing with diabetes and hypertension but some participants wanted priority for cervical cancers or mental health etc. Shabbar said about the meeting “I was struck by how little evidence there is on how services should be scaled up, or where from. Also, nothing on evaluating the impacts of expanding roles of HIV programmes on outcomes of HIV-infected persons. Not even incidence of key NCDs in the HIV-population. “

Upcoming Meetings:

NIHR Cohort meetings in Birmingham 7-9th May. The first day is for Research and Finance Managers and the following two days for Directors and partners. Hazel and John will attend day 1 and Shabbar and Hazel will attend days 2-3. Shabbar has been invited to make a presentation, which will be a fantastic opportunity to promote our work.

In line with the steering committee recommendations, the NIHR group is planning a small meeting of experts to define the future research agenda in the 2nd half of 2019.

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